

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

OCT 25 2017

I. Name of Lobbyist	(s) Susan H. Paschell ; James P. Monahan	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist	's partnership, firm or corporation, if any:	THE STATE
The Dupont Group (Name of partnership, firm	(A) Composition	
	•	
	e 401 Concord, NH 03301 (Town/City) (State) (Zip Code)	
(603)228-3322	(603) 228-0713	e-mail <u>imonahan@dupontgroup.com</u>
	(Fax) covers: (Choose one – file separate reports for s which are not attributable to any one client)	each client, OR you may file a separate report for reportable
All reportable t	ransactions occurring in the month prior to the r	eporting date relative to the following client:
Bi State Primary Ca	(Full Name of Client as it appears on	the Lobbyist Registration Form)
All reportable tranto any particular clier		's family), or the lobbying firm listed below which are unrelated
IV. Date of Report Reports cover	April 26, 2017 activity from date of registration to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/17
	October 25, 2017 X activity from 7/1/17 to 9/30/17	January 31, 2018
	no fees received and no reportable transactio, complete just this form and submit it to the Sec	ns made since the last report. retary of State's Office, State House, Room 204, Concord, NH
	nal reports are attached: ved fees or made expenditures, you must file Ad	dendum A Fees and Expenses
☐ If you have paid a Reimbursement	an honorarium or reimbursed expenses, you mus	et file Addendum B- Report of Honorariums or Expense
☐ If you, your firm,	or your family has made political contributions	, you must file Addendum C- Political Contributions.
I have read RSA 15, best of my knowledg	e and belief.	firm that the foregoing information is true and complete to the
parautt.	Paschell	
(Signature of lobbyist)		10/25/2017 (Date)
Susan H. Paschell		



STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

I. Name of Lobbyist(s)					
Susan H. Paschell ; James P. Monahan					
II. Name of lobbyist's partnership, firm or corporation, if any:					
The Dupont Group					
(Name of partnership, firm or corporation)					
III. Name of Client Bi State Primary Care Association	<u>D</u> ate 10/25/2017				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to including fees for services such as public advocacy, government relations, or public legislation, and related legal work. The gross fee amount reported shall not be received.	ublic relations services including research, monitoring				
a) Total of all fees received in this reporting period	a) \$6,250				
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$18,000				
c) Total of all fees received to date (Add lines a and b)	c) \$24,250				
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0				
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if expert unrelated to any one client a separate report may be filed for the lobbyist(s)/firming categories of expenses: (a) the aggregate total of all expenses paid during the resoffice expenses; (b) the aggregate total of all individual expenses where the experimental purchased during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person being termized statement of each individual expenditure made during this reporting provered by (a) (for example: purchase of a meal with value of greater than \$25 subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported and the province of the properties of the properties of the person that the province of the person that the province of the person that the province of the person that the person t	nditures are made by the lobbyist(s)/firm that are m. Expenses are to be reported in one of three eporting period for salaries, benefits, support staff, and penditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to ing lobbied with a value of \$25.00 or less); and (c) an period of greater than \$25.00 for any purpose not purchase of a ceremonial object to be given to the taurant expenses for a legislative reception). Expenses				
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$				

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from whom paid or to whom charged.	a lobbying fees during this reporting period, including by
Paid to: Amount:	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm tha best of my knowledge and belief. Jusau H. Paschell	
<u>10/2</u>	5/2017
(Signature of lobbyist) (Date	e)
Susan H. Paschell	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affi Statement of Income a			
Name of Lobbying par	tnership, firm, or corporation	on: The Dupont C	Froup
Name of Client (leave l	blank if Statement is for the	e partnership, firm, or corpo	ration and not related to any particular
client): Bi State Prim	nary Care Association		
Date of Report (check	one):		
April 26, 2017 🗆	July 26, 2017 🔲	October 25, 2017 X	January 31, 2018 🔲
			enses described above, and the Idendum forms being submitted):
LAddendum A(s).			
0 Addendum B(s).			
0Addendum C(s).			
the best of my knowled	lge and belief.	ation on the Statement and	each Addendum is true and complete to
Jr The	and produce the second of the		
(Signature of lobbyist)			/2017
James P. Monahan		(Butt	,
(Print Name of lobbyis	t)		